

October 1996

Clinical Center News

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CC board to convene here on Oct. 21

The Clinical Center's new 17-member Board of Governors is expected to convene for the first time here on Oct. 21.

Appointed by HHS Secretary Donna Shalala, the board will advise the NIH and CC directors on aspects of Clinical Center operations and management, including budget and strategic plans.

Changing how the CC is governed topped the list of recommendations contained in a report to Shalala earlier this year.

An Options Team she put together had spent most of 1995 scrutinizing the CC's structure and organization as part of Vice President Gore's Reinventing Government II initiative.

A collection of NIH committees and groups has historically governed the CC.

The new board will include eight members from NIH and nine from outside the organization.

Their names were not available for publication at press time.



Guest House opening

Kathy Montgomery, associate CC director for nursing, and Dr. John Gallin, CC director, shared ribbon-cutting honors for the new NIH Guest House Sept. 27. The ceremony officially opened the doors for a pilot project to provide overnight accommodations for CC patients and their families. Tours of the six efficiencies and one, one-bedroom apartment in Building 20 followed.

EEO pilot begins at CC

The Clinical Center is among the first groups at NIH to test a new system for handling the initial stages of equal-opportunity complaints.

That means faster investigations of allegations, improved and streamlined communications, and the chance for quicker resolution for CC employees who feel that they have been discriminated against or sexually harassed.

Joining the CC in the pilot, which began Sept. 15, are the NIH Office of the Director, the Office of Research Resources, and NCI.

There is an informal and a formal process for dealing with allegations of discrimination and harassment, explains Carl Lucas, chief of the CC Office of Equal Employment Opportunity (EEO).

It's the informal, or pre-complaint, phase that the Clinical Center and other pilot participants will handle.

During the informal stage, he says, EEO counselors investigate specific allegations and talk with everyone involved. Most problems,

See EEO investigations, page five

Clinical research issues before Congress

by Dr. John I. Gallin
CC Director

It's an exciting time for clinical research and we at the Clinical Center have an enormous stake in several issues before Congress this fall.

The Office of Management and Budget has said that it expects that the Clinical Center will generate some \$18 million by collecting health-insurance payments for the routine care of patients in clinical trials here in FY97.

Appropriations bills passed by the House of Representatives on July 12 and by the Senate Appropriations Committee on Sept. 12 authorize NIH to collect this money and credit it to the NIH Management Fund. The Clinical Center does not receive a separate budget. Our budget comes from the institutes through this management fund.

Tapping this pool of health-care dollars isn't a new—or particularly simple—idea. In order for it to work effectively, we must:

- Establish a new cost-accounting system to track patient-care costs.

- Craft a method for charging that doesn't impose an enormous amount of paperwork on either the referring physicians, the researchers, or the patients.

- Make sure that uninsured patients are not put at a disadvantage for acceptance into protocols.

Another bill before Congress reinforces the importance of clinical research to American's health. The Clinical Research Enhancement Act of 1996, which has become a part of the NIH Revitalization Act of 1996, acknowledges that clinical research is crucial to expanding scientific knowledge and developing new and better ways to treat disease. If passed, this bill would allow NIH to establish an intramural clinical research fellowship program and a continuing education clinical research training program.

Finally, both the House and the Senate agree on the need to continue to fund construction of the new Clinical Research Center. Bills now before Congress earmark about \$90 million for the new facility in FY97.

While we had hoped that Congress would approve the plan to fund the entire \$310 million project in FY97, as outlined in President Clinton's budget request earlier this year, Congressional support for the new center is clear.

Naming the new Clinical Research Center for Sen. Mark O. Hatfield (R-Oregon) was included as an amendment to the Senate appropriations bill awaiting a final vote as this issue of *CCNews* goes to press, and it's anticipated that it will be included in the final funding bill.

Sen. Hatfield has long been a proponent of biomedical and clinical research. Under his chairmanship of the Senate appropriations committee, funding for NIH has increased by more than \$2.5 billion. Last year he led Congress in maintaining overwhelming support for biomedical research by offering an amendment to the budget resolution that spared NIH from a 10 percent cut in funding.

All of this is good news for clinical research in general and the Clinical Center in particular.

Observance spotlights 'Ability for hire'

Celebrating October as National Disability Employment Awareness Month offers an opportunity to look at how the CC Disability Employment Program benefits employees with and without disabilities. The CC Office of Equal Employment Opportunity (EEO) develops and manages the program. Its primary mission is to advance the employment of persons with disabilities.

Theme for this year's observance is "Ability for Hire." Persons with disabilities work on Main Street and on Wall Street. They are trained

accountants, bricklayers, scientists, chefs, dishwashers, radio announcers—the list goes on. Their skills and talents are needed and their abilities are for hire. Improved accessibility and acceptance has resulted in more job opportunities for persons with disabilities.

In the CC EEO office, Jerry Garmany coordinates the Disability Employment Program, which ensures reasonable accommodations, often making it possible for a qualified person with a disability to do the same job as anyone else, but in a slightly

different way. Some accommodations are simple adaptations. Others require technically sophisticated equipment.

The EEO office also coordinates requests for sign-language interpretation for deaf applicants, employees, and patients, and provides Teletypewriter (TTY) devices to deaf or hard-of-hearing employees.

For program details, contact Garmany at 496-9100 (TTY), through the Maryland Relay Service on 1-800-735-2258, or e-mail him, jgarmany@pop.cc.nih.gov. (by Jerry Garmany)

Clinical Center
News

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A Caring Canine

Wearing a flowered lei and basking in the affection of co-workers, Samantha, a German shepherd, was honored with a reception commemorating her retirement last month as a Caring Canine. With her is her owner, Jane Bartholomew. Samantha is one of the original Caring Canines of the National Capital Therapy Dogs, Inc. She and her colleagues are volunteers—as are their owners—who visit with patients at the Clinical Center and other hospitals.

briefs

Pumpkin chase ready to take off

Step up to the starting line at 9 a.m. on Oct. 27 and enjoy the fifth annual Great Pumpkin Chase. The 5K run and one-mile fun walk is sponsored this year by the NIH Federal Credit Union and radio station WKYS to benefit the Friends of the Clinical Center.

T-shirts, lots of prizes, and refreshments will be on tap for the event, which usually includes teams decked out in Halloween finery. Registration forms are available in the R&W stores. For more on the race, call 230-4817.

Classes on tap for November

Call 496-1618 to register for these November classes:

- Creatively Managing Change***, Nov. 18, noon-3 p.m., or Nov. 19, 9 a.m.-noon, first floor conference room, 6100 Executive Blvd. Confront the impact of organizational transition and the fear of being “RIFed off.” Recognize the dangers and opportunities in change.

- Getting up to Speak***, Nov. 21,

8:30 a.m.-4:30 p.m., first floor conference room, 6100 Executive Blvd. This class helps participants develop the basic skills needed to deliver an organized presentation to a single individual or a large group. It also offers tips on using visual aids and managing stage fright.

These classes are sponsored by the education and training section of the Office of Human Resources Management.

String concert series returns

The Manchester String Quartet Series returns for its eighth season on Oct. 21. The concert series is presented 12:30-1:30 p.m. in Masur Auditorium.

Concerts are also set for Nov. 4, Dec. 9, Jan. 13, Feb. 10, March 3, April 7, and May 19. Call Sharon Greenwell at 496-4713 for more information.

Learn about difficult people

The NIH Employee Assistance Program’s video workshop series

opens Oct. 15 with “How to Deal with Difficult People.” Program counselors will lead a group discussion following the video.

The series—Tuesdays at the Little Theater—is free, open to all employees, and requires no reservations. Just drop by the Little Theater, which is in the Visitor Information Center, at noon. Sessions run an hour. Other programs will be offered Oct. 22, and Nov. 5, 12, and 19.

Call 496-3164 for details.

RNA symposium set this month

The NIH RNA Club will host the Mid-Atlantic Regional RNA Symposium on Oct. 22. Sessions will begin in the Natcher Conference Center at 9 a.m. Tom Blumenthal of Indiana University will present the keynote address, “Operons in the Nematode Genome.” Platform talks will focus on RNA metabolism and RNA-protein interactions. For registration details, access the symposium web site, <www.nci.nih.gov/intra/LTVB.SYMP.HTM>.



Pam Brye, Melissa Zafonte, and Rosemary Parisi (from left), CC Nutrition Department, were tapped to help provide food inspections during the Olympics in Atlanta. They joined a cadre of federal, state, and local sanitarians to make sure the foods available at various venues were safe, a critical public-health mission during the games. They were among recipients of the Hammer Award given last month by the National Performance Review Agency.



Ann McNemar, a nurse on 9 West, had a behind-the-scenes, front-row seat to the Olympic Games as a scorer for the equestrian events.

Staffers experience Atlanta's Summer Games

While the world waited for Atlanta's summer games to begin, three Clinical Center dietitians were mobilizing to answer a call for help from Olympic organizers.

Pam Brye, manager of patient services for the CC Nutrition Department and PHS chief dietitian, received the call. The Public Health Service was needed to help with food inspections provided by the Fulton, Ga., health department.

That was Saturday morning. By Tuesday, Brye was in Atlanta, along with CC research dietitians Melissa Zafonte and Rosemary Parisi. They joined a cadre of federal sanitarians, dietitians—and one veterinarian—from ten states.

Hundreds of vendors were licensed to sell meals and snacks on the streets of Atlanta. Olympic

planners had underestimated the number of sanitarians needed to make sure that the food was safe. Huge crowds and hot temperatures made that monitoring crucial. "There was great potential for food-borne outbreaks of illness," pointed out Brye, who staffed the food inspection command post.

Zafonte and Parisi joined teams that worked two shifts a day performing the inspections. "The team members made sure that foods were kept at the correct temperature, that handwashing and toilet facilities were available, and that the vendors had the proper permits," Brye explained.

"The teams were responsible for specific areas. My team covered the area around Centennial Park," said Zafonte. "The vendors in this area had proper permits, but we had the

authority to shut down anyone not in compliance."

SWAT teams were called in when a food vendor was ordered to shut down and didn't.

"The streets had a carnival atmosphere," noted Parisi. "When people bought food from a street vendor, there was nowhere to sit, except on the curb. But the city needed the vendors during the Games—the permits meant income for the city."

"When a vendor applied for a permit, there was no way to know if they had had training in food handling," Brye added.

"Many of those vendors had invested thousands of dollars and were making only hundreds," said Zafonte. "People weren't buying."

That made the inspectors easy targets for the vendors' frustrations.

"They saw us often and they sometimes vented their frustration on us. But they also understood that we had a lot of people to protect," Zafonte explained.

The teams performed about 3,400 inspections during their 10 days in Atlanta. They responded to 49 complaints and mounted six food-borne illness investigations. More than 20,000 pounds of food had to be discarded as result of their inspections, including nearly 11,000 pounds of quiche.

"This was the first time that dietitians have been called to participate in an emergency effort," said Brye.

"The experience put a new perspective on our profession's role in the PHS," Zafonte said. "We, too, are public servants."



She was afraid of horses and climbed up on one only because she was too embarrassed to tell the riding instructor she hadn't come for lessons. "I had tagged along with a group of friends who wanted to learn to ride. The teacher assumed I did, too," explains Ann McNemar, laughing.

And for the reluctant student, riding became a life-long love and her ticket to an up-close, behind-the-scenes look at Olympic competition. McNemar, a nurse on 9 West, was tapped as a scoring assistant for the equestrian competition during the Summer Games in Atlanta.

When the call for applications for volunteers appeared in an equestrian magazine three years ago, friends encouraged her to apply. She was one of about 20 accepted.

"In many ways, scoring at the Olympics was easy," admits the veteran scorer for local events. "There's a lot more technical support." Timing information, penalties at cross-country fences, and movement scores during the dressage events were entered into timing equipment linked to computers, which reformatted the data for television and the commentators, and printed the results.

Everything was also recorded by hand so that manual and electronic scores could be compared before the final results were published. During grand prix jumping, McNemar oversaw the manual scoring master sheet. On endurance days, she was one of two scorers for the steeple chase events. For dressage events—competitions in which the horses move through a series of specific movements—she served as a computer scribe. "I fed the scores directly into the computer," she says. "I was very nervous about doing it right. Once the whole screen disappeared! I certainly have a better appreciation as to what goes on behind the scenes."

The weather and security concerns topped the agenda of behind-the-scenes worries for Olympic participants. "Having the games in Atlanta spurred a world-wide research effort on horse and heat-related issues," McNemar says. "A good bit of data was developed."

Because of the South's sultry summer weather, the cross-country course was shortened, rest stops

added, and mist machines installed. "Competitions started early and ran late, with breaks during the middle of the day. Weather sensors and temperature monitors were in place and the competitions would have been stopped if necessary."

Heightened security meant thorough inspections of vehicles and individuals coming in for the competitions. "I kept hearing people talk about sanitizing things. I thought they were talking about ticks on the horses, but it turned out to be for bombs."

McNemar's involvement in international competitions didn't end with last summer's Olympics. She'll be involved in next year's North American dressage event and plans to attend the world equestrian championship in Ireland in 1998.

She and her horse Avenue may participate in some local games as well. "I don't love jumping that much because I'm becoming breakable," she says with a laugh. "Avenue knows more than I do and I'm learning from her. We'll compete once we both figure it all out." *(Stories by Sara Byars)*

... CC to handle EEO investigations in pilot

(Continued from page one)

Lucas points out, are settled in this phase.

If not, the person with the complaint can move into the formal phase of the process, which is handled by the NIH Office of Equal Opportunity (OEO), for resolution.

"We have more of a vested interest in taking care of our own, to quickly settle disputes," Lucas says. "This new approach also gives us more of an opportunity to become involved before a situation evolves into a formal complaint."

Conflict resolution—the earlier in the process the better—is crucial. "Most of the time, complaints arise from a breakdown in communications. We in EEO don't take sides, and we serve all employees, managers and staff. NIH developed this pilot project to give the ICDs more flexibility in doing

business," he added.

In the past, employees with a complaint would take it directly to the NIH Office of Equal Opportunity's complaints management and adjudication branch. An NIH EEO counselor would, in the informal phase of the process, investigate and prepare a report for NIH OEO review in the formal phase.

"Historically, we at the Clinical Center would help the assigned counselor conduct the investigation and handle paperwork," he said.

In preparation for their new roles, three staff EEO specialists and seven counselors recruited from throughout the Clinical Center have had special training in how to mediate conflict and formally lodge complaints found to be legitimate. The NIH OEO staff will work with the CC counselors on the initial cases. *(by Sara Byars)*

Town meeting set

Dr. John Gallin, CC director, will convene a town meeting for CC employees Nov. 4 at 2 p.m. in Masur Auditorium. Among the topics on the agenda is a report on the first meeting of the Clinical Center Board of Governors, which is set for Oct. 21. Dr. Gallin will also discuss the CC strategic plan and ongoing Clinical Center initiatives.

Cafeteria closing

The 2nd floor cafeteria is slated to close Oct. 19, according to DES space management officials, so that the CC Nutrition Department can use the kitchen while their own is undergoing ceiling repairs. GSI is expected to increase staffing in the B1 cafeteria. The repair project is expected to take several months.

Other changes during the relocation:

- B1 cafeteria hours on the weekend will be 6 a.m.-1 p.m.;
- The cafeteria will close at 11 p.m. Monday-Friday; and
- Sandwiches, salads, juice, and water will be available at the coffee cart in the lobby and the area will be open until 5 p.m. These operations will continue during October while a rehab will add new tables, chairs,

benches, and a bar. That project, says DES, should be complete by early next month.

Leave scheduling updates announced

Effective Oct. 1, employees will no longer be required to use their accrued annual leave during the leave year prior to using any restored leave previously credited. Restored leave and regular annual leave may be used in any order the employee wishes.

According to HHS, this includes any leave restored to employees as result of the furlough, which employees have until January 1999 to use.

And speaking of leave, employees with use-or-lose leave have until Nov. 23 to schedule a time to take it.

Receipts help CC school

Your Giant and Safeway grocery receipts added up to a new television for the Clinical Center school last year. The school participates in the local equipment-for-receipts exchange program, which has meant books, computer software, and

supplies for the school-away-from-home for CC patients.

Located on the 10th floor, the school is classroom to more than 300 students each year. If you'd like to help enhance the program, drop off the receipts or send them to room 10S235.

Worksite health program offers exam

Need a mammogram? George Washington University's Breast Care Center and the NIH Worksite Health Promotion Program will make it easy to arrange.

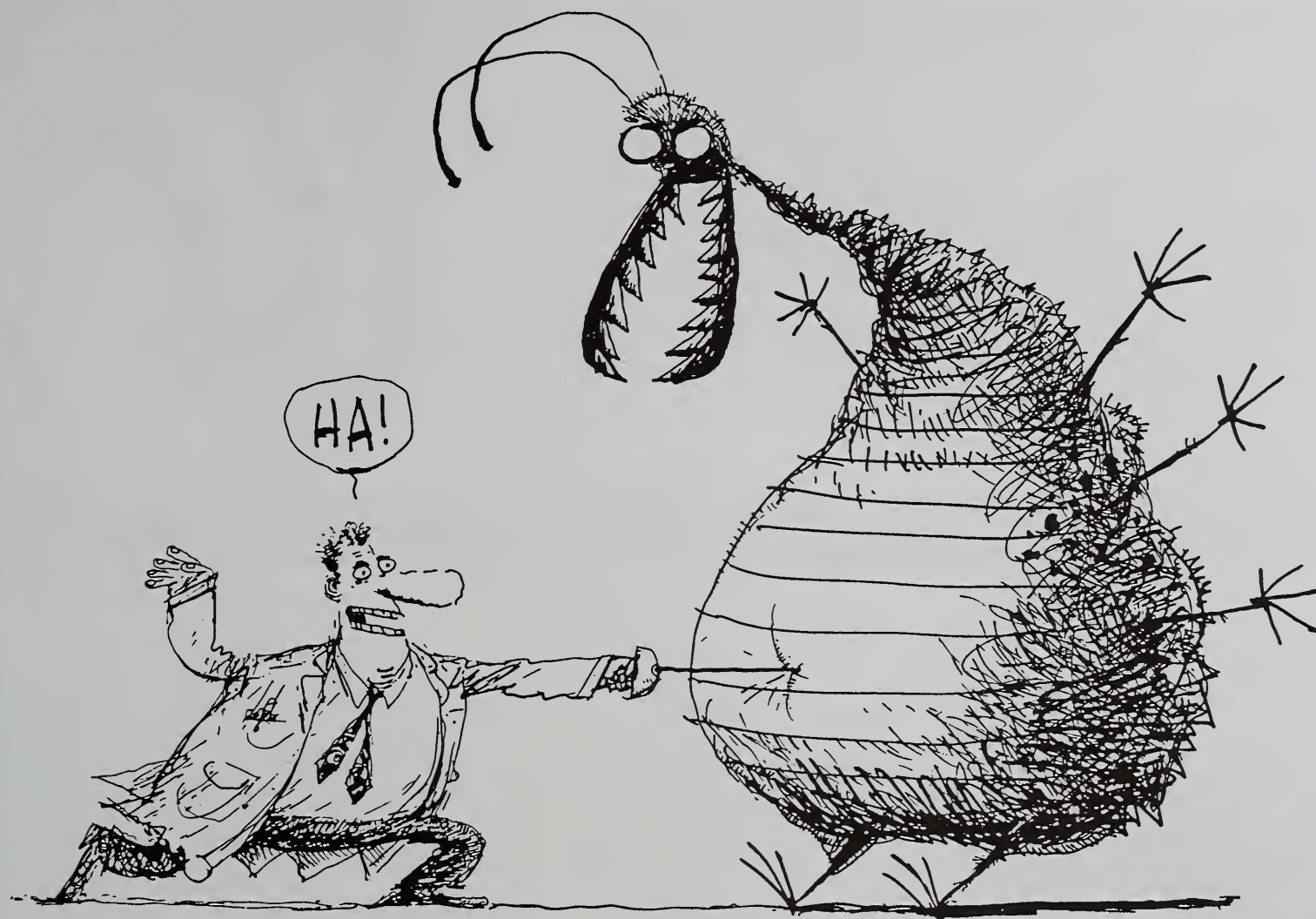
The center's mammography van will be in the parking lot behind EPS and EPN on Executive Blvd. Oct. 30; on Convent Drive near the CC on Oct. 31; and at Natcher on Nov. 6. Hours are 8:30 a.m.-4 p.m.

The mammography costs \$75. The mobile program is accredited by the American College of Radiology. To schedule an appointment, call (202) 994-9999. Call Susanne Strickland at 496-1105 if you have general comments or suggestions about the worksite mammography program or other initiatives offered by the Worksite Health Promotion Plan.

Campaign begins

The annual Combined Federal Campaign kicked off this month and Clinical Center key workers will be sharing information about the program with co-workers throughout the next few months. Theme for this year's campaign, led at the Clinical Center by Walter Jones, CC deputy director for management and operations, is "Help Hope Take Shape." Warren Moyer (left), CC management analyst and a campaign coordinator, talked with Monica Restrepo, Nursing Department, and Mary Vailati, Clinical Pathology Department, during a recent meeting for departmental key workers. With them is Dan Carney, a campaign executive on loan from the Treasury Department. Carney led some of the training sessions.





Flu shots—autumn's rite of passage

For more than a decade, the Occupational Medical Service (OMS) has offered free influenza immunizations to NIH employees. Knowing how important it was to be protected from this virus, more than 5,000 NIH employees got vaccinated by OMS last year. Do you need a flu shot this year?

Last year, five patients being treated at the CC were later diagnosed with the flu. During the course of caring for them, 90 health-care workers and support staff were exposed to the virus. Twenty-five hadn't been vaccinated and went to OMS for evaluation; at least six developed the flu.

That's why an annual flu shot is important. If many hospital workers become incapacitated, patient care could suffer.

You can't predict where you will be exposed to influenza, whether at

home, in your community, or at work. Because you work in a hospital, disease prevention experts recommend that you get an annual flu shot. By doing this, you can help prevent this highly contagious virus from spreading among high-risk persons such as the elderly and those with underlying health problems.

If you received a vaccination in the past, you still need to be vaccinated because influenza viruses change every year. The vaccine is made of safe, inactive particles that cannot cause influenza.

To make it convenient for patient-care employees in building 10, OMS will administer shots for these workers on various nursing units from 6:30–11:30 a.m. and 4–6 p.m. on Oct. 7, 9, and 11. Watch for posters in clinics and patient-care units for times and places. The walk-in schedule is at right.

Schedule

First letter, last name	Date	a.m.	p.m.
GH	Oct. 16	7:30-11	1-3
IJK	Oct. 17	7:30-11	1-2
LM	Oct. 22	7:30-11	1-3
NOPQ	Oct. 24	7:30-11	1-2
RS	Oct. 29	7:30-11	1-3
TUV	Oct. 31	7:30-11	1-2
WXYZ	Nov. 5	7:30-11	1-3
AB	Nov. 7	7:30-11	1-2
CD	Nov. 12	7:30-11	1-3
EF	Nov. 14	7:30-11	1-2
OPEN	Nov. 19	7:30-11	1-3
OPEN	Nov. 21	7:30-11	1-2

The OMS Walk-In Influenza Clinic in building 10 is in room 6C306. Evening clinics will be held Mondays and Thursdays, Oct. 21–Nov. 21, between 4:30 and 8 p.m. Vaccinations will be offered on a first-come, first-served basis, with no appointments necessary.

MFP continues this month

The Clinical Center's 1996 Medicine for the Public lecture series begins Oct. 1.

The lectures, which are free and open to the public, are held at 7 p.m. on Tuesdays in Masur Auditorium.

This year's schedule:

•Oct. 1, *Drug Abuse: A Preventable Behavior; Drug Addiction: A Treatable Disease*, Dr. Alan Leshner, NIDA;

•Oct. 8, *Heart Attacks and Cardiovascular Risks in Men and*

Women, Dr. Jeffrey Hoeg, NHLBI;

•Oct. 15, *Nicotine Addiction: Science, Medicine, and Public Policy*, Dr. Jack Henningfield, NIDA;

•Oct. 22, *Drug-Resistant Bacteria: Old Foes with New Faces*, Dr. David Henderson, CC;

•Oct. 29, *Colorectal Cancer Therapy Now and Into the Next Millennium*, Dr. Carmen Allegra, NCI;

•Nov. 12, *Aging: Genes, Cells, and Selves*, Dr. Richard Hodes, NIA.



For more information, call CC Communications at 496-2563.

o c t o b e r

- 8** **Medicine for the Public**
7 p.m.
Masur Auditorium
Heart Attacks and Cardiovascular Risks in Men and Women, Jeffrey Hoeg, M.D., NHLBI
- 9** **Grand Rounds**
noon-1 p.m.
Lipsett Amphitheater
From Bedside to Bench: Immunologic Abnormalities in Patients with Head and Neck Cancer and the Expression of Immunoregulatory Cytokines by Tumor Cells, Carter Van Waes, M.D., Ph.D., NIDCD; *Alzheimer's Disease: Defective DNA Repair and Neurodegeneration*, Jay H. Robbins, M.D., NCI
- Wednesday Afternoon Lecture**
3 p.m.
Masur Auditorium
Genetic Analysis of Animal Models for Behavioral Disorders, Wade H. Berrettini, Ph.D., Thomas Jefferson University
- 15** **Medicine for the Public**
7 p.m.
Masur Auditorium
Nicotine Addiction: Science, Medicine, and Public Policy, Jack Henningfield, Ph.D., NIDA

- 16** **Grand Rounds**
noon-1 p.m.
Lipsett Amphitheater
Current Trends in the Management of Early Stage Breast Cancer, David Danforth, Jr., M.D., NCI; *iNOS Gene Expression in the Brain During Systemic Inflammation: Pathophysiologic and Diagnostic Implications*, Julio Licino, M.D., NIMH
- Wednesday Afternoon Lecture**
3 p.m.
Masur Auditorium
A Role for Auxiliary Genes in the Pathogenesis of AIDS, Ronald C. Desrosiers, Ph.D., Harvard Medical School
- 22** **Medicine for the Public**
7 p.m.
Masur Auditorium
Drug-Resistant Bacteria: Old Foes with New Faces, David Henderson, M.D., CC
- 23** **Grand Rounds**
noon-1 p.m.
Lipsett Amphitheater
Controversies in the Nephrotic Syndrome, Howard A. Austin, III, M.D., NIDDK; *Update: Clinical Research Special Interest Group*, H. Clifford Lane, M.D., Clinical Research Special Interest Group

Wednesday Afternoon Lecture
3 p.m.
Masur Auditorium
Using Deadly Cone Snails to Learn Drug Design and Probe Nervous Systems, Baldomero M. Olivera, Ph.D., University of Utah. This is the NIGMS Dewitt Stetten, Jr., Lecture

- 29** **Medicine for the Public**
7 p.m.
Masur Auditorium
Colorectal Cancer Therapy Now and Into the Next Millennium, Carmen Allegra, M.D., NCI
- 28** **Special Monday Lecture**
3 p.m.
Masur Auditorium
Women and Men in Conversation: A Linguistic Approach, Deborah Tannen, Ph.D., Georgetown University. This is the NIH Director's Cultural Lecture
- 30** **Clinical Staff Conference**
noon-1 p.m.
Lipsett Amphitheater
The Role of Magnesium in Cardiovascular and Brain Disorders, Ronald J. Elin, M.D., CC, moderator
- Wednesday Afternoon Lecture**
3 p.m.
Masur Auditorium
The Mechanism of mRNA Editing: gRNA-Specified Uridylate Insertion and Deletion, Kenneth D. Stuart, Ph.D., University of Washington

Coming in November

- 12** **Medicine for the Public**
7 p.m.
Masur Auditorium
Aging: Genes, Cells, and Selves, Richard Hodes, M.D.,